



Helping people with dementia living in residential care to engage meaningfully with loved ones



What is the focus of the research?

Creating an evidence-based program to help care supporters engage meaningfully with their loved ones with dementia living in residential care.



Why is it important?

Most people living with dementia eventually move into a residential aged-care facility (RACF), which causes feelings of guilt and anxiety in their loved ones. While quality visits with the person in care are important, family members are unsure what to do when they have difficulty communicating or can't take part in everyday activities.

There are no residential care-based programs that teach loved ones how to communicate with people living with dementia, involve them in activities suitable for their abilities, or understand the behaviour changes that commonly occur when people can't express their needs or wants. In fact, the 2021 Royal

Commission into Aged Care Quality and Safety described RACF as environments of dependency, isolation and disengagement.

Community-based programs that engage and upskill care supporters of people living with dementia have been shown to reduce behaviour changes, improve quality of life, and alleviate stress. In this project, Dr Rahja will adapt a successful evidence-based program designed for people living with dementia and their care supporters in the community to the residential care environment.



We hope to make major progress towards improving the care of people with dementia living in residential facilities and their care supporters ”

– Dr Miia Rahja

The Care of People with Dementia in their Environments (COPE) program educates carers around different ways of communicating with people living with dementia and engaging them in meaningful activities. It also teaches carers how to look after their own health and wellbeing.

Dr Rahja and her team will modify the COPE program to RACF (COPE-RACF) and train RACF staff to deliver it to residents and their care supporters. The results of this project will help inform RACF how to offer dementia care that is based on high-quality evidence, promotes good quality of life, and supports the needs of residents and their care supporters.



How will this happen?

Stage 1: partner with up to six South Australian RACF who would like COPE-RACF in their facility. Interview staff for their views on including new programs, such as COPE-RACF. Hold group discussions with up to 12 care supporters to explore their thoughts about including and accessing new programs in the facility.

Stage 2: occupational therapists to deliver the program to up to 36 residents and their care supporters across the six RACF. Use specialised questionnaires to collect before/after program participation information regarding quality of life, activity participation and care supporter wellbeing.

Stage 3: gather feedback from staff and participants after program completion to determine its acceptability and effectiveness.



What will it mean for people with dementia?

- An evidence-based program that aims to improve their quality of life.
- Aged-care staff who are trained to maximise their abilities.
- Meaningful visits and engagement with loved ones.
- More independence and purpose.
- Fewer incidents of changed behaviours.



Who's undertaking the research?

Dr Miia Rahja, Flinders University

Dr Rahja is an occupational therapist and research fellow at Flinders Health and Medical Research Institute. She completed her PhD in 2019, in which she evaluated the implementation of the COPE program into Australian communities. Dr Rahja has collaborated with the Australian Healthcare and Hospitals Association to write a health policy issues brief to directly inform Australian policy and healthcare decision makers about reablement programs for people living with dementia. She received the Australian Association of Gerontology SA Division 2021 Robert Penhall Early Career Research Award for this work.

Dr Rahja also manages the Australian Dementia Network's 'screening and trials' clinic and their 'Clinical Quality Registry' for dementia and mild cognitive impairment in South Australia.

The title of Dr Rahja's project is '*I still want to spend quality time with him*': Adapting and implementing an evidence-based dyadic intervention program for people living with dementia in residential aged care.

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